

MINUTES
COMMUNITY HEALTH COMMITTEE SPECIAL MEETING
COUNCIL CHAMBERS, EDINA CITY HALL
DECEMBER 2, 2013
6:30 PM

I. CALL TO ORDER

The meeting was called to order at 6:35 pm.

II. ROLL CALL

Answering roll call members were Melinda Bothum-Hurley, Tone Deinema, Matt Doscotch, Janet Johnson, Mary Jo Kingston, Nadia Martyn, Aditya Mittal, Alison Pence, Joel Stegner, and Staff Liaison Laurene Draper.

III. APPROVAL OF MEETING AGENDA

Member Stegner approved the motion. The motion was seconded by Member Bothum-Hurley. All voted aye.

IV. ADOPTION OF CONSENT AGENDA

A. Approval of November Minutes

Motion to approve the minutes was made by Member Kingston. The motion was seconded by Member Martyn. All voted aye.

V. REPORTS/RECOMMENDATIONS

A. Bloomington Public Health Recommendation for Renewal

There needs to be awareness in the community regarding what Bloomington Public Health (BPH) does for Edina. Programs include clinical services, health promotion, disease prevention and control, family health, vulnerable adult and senior programs and emergency preparedness. Examples: BPH provided 662 Edina residents with influenza shots, held classes for 394 Edina students addressing issues related to alcohol, tobacco and drugs, offered cervical and breast cancer screening, worked with 360 WIC clients, provided food vouchers for children and breastfeeding women, 180 seniors got 1 on 1 nurse consultations, high risk home assessments were done. The motion to renew the contract with BPH was passed in November.

B. Top Ten Health Priorities

- 1) Nutrition, Obesity and Physical Activity
- 2) Aging of the Population
- 3) Alcohol, Tobacco, Drug Use and Abuse
- 4) Social and Emotional Wellbeing
- 5) Mental Illness

- 6) Unintentional Injury Prevention
- 7) Intentional Injury Prevention
- 8) Maternal and Child Health
- 9) Immunization and Infectious Disease Prevention
- 10) Health Care Access

Many of these priorities were also identified by BPH. Obesity, at the top of the list, has recently been identified as a disease. Aging is toward the top because of our demographic.

C. SHIP Funding and Priorities

Overview by Member Pence. The Statewide Health Improvement Program (SHIP) was created about 10 years ago under Tim Pawlenty. Now in its third rendition, funding which had been previously cut, is almost fully restored. Bloomington's Public Health Division recently received \$886,000 from the Minnesota Department of Health (MDH) for SHIP. The Public Health Division will use the money to continue helping Bloomington, Edina and Richfield make healthy eating, physical activity and tobacco-free living easier for everyone who lives and works there. Before submitting its proposal for SHIP, representatives from the Public Health Division met with over 50 Bloomington, Edina and Richfield community members and partner organizations. All shared ideas for working together to create healthier cities. The SHIP plan focuses on schools, worksites and the community. It also assists health care providers to connect patients with community resources that support lifestyle changes.

Examples of what SHIP partners will be working together on include the following:

Healthier food and beverage choices at city-operated concessions

Healthier food and beverage choices, education opportunities and fresh food donations for emergency food programs

More bike parking and other city amenities that make it easier for people to use active transportation - bicycles, walking and mass transit

Member Stegner inquired as to how success will be measured. Member Pence said the group has only met once so far but their plan should be revealed in the next few months.

Member Bothum-Hurley asked if the member cities can offer input. Member Pence indicated that she will take input from the CHC to SHIP.

D. Review of Draft Report and Recommendation

Overview by Chair Doscotch. This 47-page document has been revised by this Committee in the last six months. It includes survey information from the 2013 Quality of Life Survey. SHIP information and the School Health Assessment sections have been completed with the most up-to-date information. Another item to consider for review is electronic cigarettes. The City Council will be addressing this issue for 2014. Chair Doscotch asked for input and comments on the Report by December 15. Chair Doscotch

will provide the Report to the City Council before the end of the year. There will be gaps and areas of focus. Conclusion of Report – meets health needs, socio economic factors, and education tend to make Edina a healthier community. The health of the community can still be enhanced.

E. City Mission, Vision and Code Modifications Recommendations

(I know this section needs lots of help – I had difficulty following)

Overview by Chair Doscotch. The Mission/Vision modifications will be addressed at the December 17 City Council meeting. Mission/Vision changes to consider are to 1503 with regard to change in City Code. The proposal is to adopt MN statute 145.10 duties required by public health boards and entities. The Committee believes this is a good position for the City. Changes to the Mission statement focus more on health related issues - physical, mental and social wellbeing for those that work and live in Edina. Vision – health related concepts. Innovation – cooperation and collaboration between health care providers and residents to provide a health environment. Further Ordinance discussion may be needed in 2014.

F. Youth, Senior and General Health Subgroups Reports

Beginning of 2013, the CHC created subgroups that focused on Youth, Seniors and General Health to provide the ability to have analysis on more focused work by the committee. Work is done and is in the report and the work plan for next year.

Youth Sub-group

Overview by Member Martyn. Youth is considered age zero to 18. Identified gap areas are:

Alcohol, tobacco and drug use

There is a significant change in percentage of youth using them between ninth grade and 12th grade. Rise in tobacco usage is 4% to 21%. Alcohol usage rose from 4% to over 40%. According to these statistics, there is work to be done. Education and change is recommended. The Chemical Health Coordinator in the school district and other organizations can assist with this.

Bullying

Edina is below the state level. Work with school district can be done. The goal is for 0%.

Member Pence said the Tri City Partners ended in 2011. Alcohol and tobacco will not be addressed by SHIP because of the lack of funding. Member Stegner mentioned the Chemical Partners Group – focused on teen drinking, smoking and drug use, could be of assistance.

The 2010 student survey was used to determine the priorities. The 2013 data may change current recommendations.

Seniors Sub-group

Overview by Member Pence. Data is not quite as cohesive as youth data. Most of data related to senior health comes from SHAPE survey in 2010. Edina information is not separate from other communities. An identified gap is the lack of connections. Social connections affect physical health. Home visiting nurse program could be a good partner. Also the Edina Senior Center. Transportation affects the lack of connections.

General Health Sub-group

Overview by Member Stegner. In the Quality of Life Survey, general health focuses on adults 19-64 but also affects seniors. The theme that came out was healthy eating and active lifestyles (diet, nutrition and exercise). The second focus is mental health and social isolation. It is Difficult for consumers to sort thru it to see what is beneficial and get motivated about diet and exercise. Edina's Quality of Life Survey was done in 2013. In the 2011 survey, 90% of surveyed residents rated the quality of life as excellent and 8% as good. In 2013, only 73% of the survey residents rated quality of life as excellent and 26% good. . Where are the issues that caused the shift? Some residents do not feel socially connected to Edina. The Survey revealed that 20% people indicated it was significant and 40% said it was somewhat significant that the City support putting emphasis on health issues.

G. 2014 Work Plan

The Plan has not yet been approved. There is a portion of the Edina population that does not know about BPH. A way to increase awareness is on the Edina website.

Member Bothum-Hurley mentioned that it is important to consider that we have changing demographics within the City. The Work Plan items are great but the Committee needs to make to be open minded in how outreach is done. Historical ways may no longer be effective. Cultural differences need to be considered.

VI. CHAIR AND COMMITTEE MEMBER COMMENTS

This is the final meeting for 2013. The Committee will move into 2014 with the City Council's input on the final Work Plan. Chair Doscotch thanked the Committee for their work.

VII. STAFF COMMENTS

A. Review 2014 Meeting Schedule and Attendance Requirements

There will be 12 meetings including one televised meeting. Attendance requirements will be sent out to Committee members.

B. Health Department Staffing Update

Jeff brown and Laurene Draper are working with Human Resources. The goal is to have the position posted this week and filled by mid to late January.

VII. ADJOURNMENT

Member Stegner approved the motion to adjourn. Member Bothum-Hurley seconded the motion. All voted aye. The meeting was adjourned at 7:31 pm.